AMENDMENTS TO THE CLAIMS

1. (Currently amended) A method of determining that a pregnant woman is at risk of developing pre-eclampsia or that her fetus is at risk of developing intrauterine growth restriction (IUGR), which method comprises:

(a) measuring asymmetric dimethylarginine (ADMA) in a pregnant woman at a stage of pregnancy from 4 to 25 weeks gestation; and

(b) determining that the woman is at risk of developing pre-eclampsia or her fetus is at risk of developing IUGR if the level of ADMA in the plasma sample is greater than 1.5 μmol/L ~~in the woman~~.

2. (Canceled)

3. (Canceled)

4. (Canceled)

5. (Canceled)

6. (Previously presented) The method of claim 1, wherein determining that the woman is at risk of developing pre-eclampsia or determining that her fetus is at risk of developing IUGR comprises determining that the woman's ADMA level is at least 3 times the normal pregnancy level.

7. (Previously presented) The method of claim 1, wherein determining that the woman is at risk of developing pre-

eclampsia or determining that her fetus is at risk of developing IUGR comprises determining that the woman has an increase in the ADMA/symmetric dimethylarginine (ADMA/SDMA) ratio that is greater than the normal pregnancy ratio.

8. (Previously presented) The method of claim 7, comprising determining that the ADMA/SDMA ratio is at least 5 times more than the normal pregnancy ratio.

9. (Canceled)

10. (Canceled)

11. (Previously presented) The method of claim 1, further comprising carrying out Doppler waveform analysis of the uterine arteries and/or flow-mediated dilatation of the brachial artery in the woman.

12.-28. (Canceled)